

ENTRY BLANK

~~BOTH~~
~~BACK~~ ~~CAGE~~ ~~TEX~~

PLEASE TYPE OR PRINT

☒ Ms.

☐ Mr. Artist JANICE LESSMAN - MOSS
(Last Name Last)

Permanent Address 6264 LAKEVIEW DR. RAVENNA
Street City

44266 Daytime Tel. (216) 678-8454
Zip Area Code

Temporary or Studio Address _____
Street City

Daytime Tel. () _____
Zip Area Code

If you do not presently live in one of the counties of the Western Reserve, in which county were you born? _____

Collaborator _____
(If Any)

If May Show entries are not accepted or not sold:

☒ Artist will pick up at Museum.

☐ Museum should dispose of.

☐ Museum should ship to artist at artist's expense
to this address: _____

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

This Entry Blank must be fully made out and signed. Unsigned Entry Blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 21, 1985.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed in the Entry Information.

Signature _____

DO NOT DETACH

DO NOT DETACH

ENTRY BLANKS

1

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☒ 5. Crafts

Materials

MIXED MEDIA / FIBER

Title

PASSING DREAMS II

Price or NFS

1500.

Insurance Value
if NFS Only

Size

40x46"

\$97.50

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
UnframedPrice of
Frame

ACCEPTED

REJECTED

DO NOT WRITE IN THIS SECTION

9 (T)

ACCEPTED

REJECTED

2

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☒ 5. Crafts

Materials

MIXED MEDIA / FIBER

Title

BLUE SEA LIGHT #2

Price or NFS

1500.

Insurance Value
If NFS Only

Size

42x46"

\$97.50

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
UnframedPrice of
Frame

ACCEPTED

REJECTED

DO NOT WRITE IN
THIS SECTION

8 (T)

ACCEPTED

REJECTED

RECEIVED

DATE

5/9

DETACH

1985 MAY SHOW
The Cleveland Museum of Art
Cleveland, Ohio 44106

JANICE LESSMAN-MOSS

Name

6264 LAKEVIEW DR.

Address

RAVENNA, OH 44266

City & State

Zip

NOTIFICATION #2

DO NOT
DETACH**1**

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☒ 5. Crafts

Title

PASSING DREAMS II

DO NOT WRITE IN THIS SECTION

9 (T)

ACCEPTED

X

REJECTED

2

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☒ 5. Crafts

Title

BLUE SEA LIGHT #2

DO NOT WRITE IN THIS SECTION

8 (T)

ACCEPTED

X

REJECTED

RETURN OF OBJECTS:

REJECTED: JUNE 4-8

ACCEPTED: JULY 29-AUGUST 3

It is understood that the Museum will have the right to dispose for its own account any object not called for by the dates listed.

This is your only receipt to claim your object(s).